FORM D

Mail Processing Section

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

_{on, DC} 5

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response.....16.00

SEC USE ONLY				
Prefix Serial				
DATE RECEIVED				

Name of Offering (ch	eck if this is an amendment and name has changed, and indicat	te change.)	
Series A, B, C, and D Li	mited Partnership Interests in Europe Enterprise III Offsh	hore L.P.	
Filing Under (Check box	(es) that apply): 🔲 Rule 504 🔲 Rule 505 🔀 Rule 506 🔲 S	Section 4(6) ULOE	
Type of Filing: New 1	Filing Amendment	· / —) (4 4 1 1) 99 (8) (4 1) 99 (8) 8) (4 4) (4 4) (4 4)
	A. BASIC IDENTIFIC	CATION DATA	**************************************
1. Enter the information	requested about the issuer		
Name of Issuer (check	c if this is an amendment and name has changed, and indicate of	change.)	
Europe Enterprise III (•	08050100
Address of Executive Of	ices (Number and Street, City, State, Zip Code)	Telephone Number (include	ling Area Code)
c/o Citigroup Private E	quity (Offshore) LLC	(212) 816-1508	
388 Greenwich Street, 3	2nd Floor, New York, New York 10013		
Address of Principal Bus	iness Operations (Number and Street, City, State, Zip Code)	Telephone Number (include	ling Area Code)
(if different from Executi	ve Offices)		
Brief Description of Busi	ness		
Private investment fund			
Type of Business Organiz	zation		
☐ corporation	☐limited partnership, already formed	P	
_	_	other (please specify): Cayman Is	lands exempted limited partnership
☐ business trust	☐ limited partnership, to be formed		PROCESSED
	Month Year		
Actual or Estimated Date	of Incorporation or Organization: 0 1 0 8	🛛 Actual 🔲 Estimated	9 9 2008
Jurisdiction of Incomorat	ion or Organization: (Enter two-letter U.S. Postal Service abb	reviation for State:	MAY 2 2 2008
	CN for Canada; FN for other fo		
GENERAL INSTRUCT		resign jurisurement) [F-111]	THOMSON REUTERS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5/91)

			A. BASIC II	ENTIFICATION DAT	A		
 Enter the information requested for the following: X Each promoter of the issuer, if the issuer has been organized within the past five years; X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and X Each general and managing partner of partnership issuers. 							
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner	
Full Nan Citigrou	ne (Last name first, Private Equity (Off	shore) LLC					
	or Residence Addr nwich Street, 32nd F		d Street, City, State, Zip New York 10013	Code)			
	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
_	ne (Last name first,						
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)	-		
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Nan	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)			
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Nan	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)			
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Nan	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)			
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Nan	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)	<u> </u>		
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Nan	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)			
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Nam	ne (Last name first,	if individual)					
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		·	
					·		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? "Subject to the discretion of the General Partner	B. INFORMATION ABOUT OFFERING															
2. What is the minimum investment that will be accepted from any individual? "Subject to the discretion of the General Partner	١.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?														
3. Does the offering permit joint ownership of a single unit?						A	Answer also	in Append	lix, Column	2, if filing	under ULC	E.				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. **Total Name (Last attame first, if individual)** **Clay Clobal Markets Inc.** **Business or Residence Address (Number and Street, City, State, Zip Code)** **States in Which Person Listed Has Solicited or Intends to Solicit Purchasers **Check *All States** or check individual States)** **Check *All States** or check individual States)** **Check *All States** or check individual States)** **Check *All States** or check individual States (Last)** **Pull Name (Last name first, if individual)** **Business or Residence Address (Number and Street, City, State, Zip Code)** **Sumes of Residence Address (Number and Street, City, State, Zip Code)** **Sumes of Residence Address (Number and Street, City, State, Zip Code)** **Name of Associated Broker or Dealer** **Sutes in Which Person Listed Has Solicited or Intends to Solicit Purchasers** **Check *All States** or check individual States)** **Check *All States** or check individual States)** **Lity In	2.	2. What is the minimum investment that will be accepted from any individual? *Subject to the discretion of the General Partner									•••••	€250,00	0*			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broken or dealer registered with the SEC and/or with a state or state, list the amoe of the broker or dealer months of the control of the person of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Enterous Global Markets Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 888 Greenwich Street, New York, NY 19013 States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3.	3. Does the offening permit joint ownership of a single unit?								•••••	_					
remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or gener of a broker or dealer registered with the SEC and/or with a state or state, list the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Ettigroup Global Markets Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 888 Greenwich Street, New York, NY 10013 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check *All States* or check individual States)										Ø						
Designess or Residence Address (Number and Street, City, State, Zip Code)	4.	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer														
Business or Residence Address (Number and Street, City, State, Zip Code) 88 Greenwish Street, New York, NY 10013 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)					dual)											
Name of Associated Broker or Dealer	Busin	ess or Re	sidence A	ddress (Nur		treet, City,	State, Zip C	ode)								
(Check "All States" or check individual States)						_		· · · · ·								
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NIH] [NI] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [FA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WV] [WV] [WV] [FR] [FI] [MI] [MI] [MI] [MI] [MI] [MI] [MI] [M	States	in Whic	h Person I	isted Has S	olicited or	Intends to	Solicit Purc	hasers								
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MS] [MO] [MI] [NI]		(Check "	All States'	or check in	ndividual S	tates)		,,	***********		************	🛭	All States	}		
Susiness or Residence Address (Number and Street, City, State, Zip Code)		(iL) [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	(MD) (NC)	[MA] [ND]	[МI] (ОН)	[MN] [OK]	[MS] [OR]	[MO] [PA]		
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Full N					[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Busin	ess or Re	sidence A	ddress (Nur	nher and S	treet City.	State. Zin C	ode)								
Check "All States" or check individual States)				·												
All States All												<u> </u>				
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] [VV] [VV] [VV] [VV] [VV] [VV] [VV] [V																
[IL]	Chec	k "All St	ates" or ci	ieck individ	ual States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************	***************************************			All States			
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	į	[IL] [MT]	[IN]	(IA) [NV]	(KS) (NH)	įKYj [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
Name of Associated Broker or Dealer	Full N	lame (La:	st name fi	rst, if indivi	dual)	,										
Check "All States" or check individual States)	Busin	ess or Re	sidence A	ddress (Nur	nber and S	treet, City,	State, Zip C	lode)								
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	Name	of Assoc	inted Bro	ker or Deale	т						<u> </u>					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	States	in Which	n Person L	isted Has S	olicited or	Intends to	Solicit Purc	hasers								
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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	·
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate Offering	Amount Aiready
	Type of Security	Price	Sold
	Debt	<u> </u>	\$
	Equity	\$	<u></u>
	□ Common □ Preferred		
	Convertible Securities (including warrants)		\$
	Partnership Interests	\$ 175,000,000	\$ 146,226,909
	Other (Specify)	<u>s</u>	S
	Total	\$ 175,000,000	\$ 146,226,909
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	•	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	14	\$ 146,226,909
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		S
	Rule 504		s
	Total		s
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		S
	Legal Fees	₩	\$ 100,000
	Accounting Fees.	ō	s
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)	⊠	\$ 46,401**
	Other Expenses (identify)		\$
	Total	Ø	\$ 100,000

^{**} Placement fees are paid directly by the investors to the placement agent and do not reduce the amounts available for investment by the issuer.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
4.	b. Enter the difference between the aggregate off- expenses furnished in response to Part C - Questic						
	issuer."			\$ 174,900,000			
5.	the purposes shown. If the amount for any purpos	roceeds to the issuer used or proposed to be used for each one is not known, furnish an estimate and check the box to the distribution of the issuer set and check the adjusted gross proceeds to the issuer set					
			Payments to				
			Officers, Directors,	D . M			
			& Affiliates	Payments To Others			
	Salaries and fees		<u>s</u>	□ s			
	Purchase of real estate		<u> </u>	□ s			
	Purchase, rental or leasing and installation of mac	hinery and equipment	🗆 s	□s			
	Construction or leasing of plant buildings and fac-	🗆 S	□ \$				
	Acquisition of other businesses (including the val- offering that may be used in exchange for the asse pursuant to a merger)	S	□s				
	Repayment of indebtedness		s				
	Working capital		S	□ \$			
	Other (specify): Investments in securities and ac	ctivities necessary, convenient, or incidental thereto.	□ \$	⊠ \$ 174,900,000			
	Column Totals		🗆 \$	⊠ \$ 174,900,000			
	Total Payments Listed (column totals added)		🛛 \$ 174,9	900,000			
_		A					
-	innum tan dulu annud shi maina sa barian ad bu sh	D. FÉDERAL SIGNATURE e undersigned fully authorized person. If this notice is filed	Lunder Dule 605 she fellewi				
an u	ndertaking by the issuer to furnish to the U.S. Secur accredited investor pursuant to paragraph (b)(2) of	ities and Explange Commission, upon written request of it	s staff, the information furnish	hed by the issuer to any			
Īss	uer (Print or Type)	Date					
	rope Enterprise III Offshore L.P.	May /3 , 2008					
	me of Signer (Print or Type)	Pitle of Signer (Print or Type)	 				
Sheri Cabasso Authorized Person							

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

